

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>REPUBLICAN NATIONAL COMMITTEE</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00003418         </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">D D D</div> /          </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">04</div> /          </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">22</div> /          </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>	

Full Name of Payee <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">D D D</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">04</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Mailing Address <b>2130 PRIEST BRIDGE DRIVE</b> <b>NO 11</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">54980.31</div>		
City <b>CROFTON</b>	State <b>MD</b>	Zip Code <b>21114</b>	<b>Transaction ID : 2015M04SE0001</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">D D D</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">04</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Purpose of Expenditure <b>MEDIA BUY</b>		Category/ Type <div style="border: 1px solid black; padding: 2px;"></div>			
Name of Federal Candidate <b>HILLARY CLINTON</b>			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House District: _____  <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">111327.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>MICROSOFT ONLINE INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">D D D</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">04</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Mailing Address <b>PO BOX 847543</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1278.39</div>		
City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75284</b>	<b>Transaction ID : 2015M04SE0002</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">D D D</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">04</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">12</div> /          </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>		
Purpose of Expenditure <b>MEDIA BUY</b>		Category/ Type <div style="border: 1px solid black; padding: 2px;"></div>			
Name of Federal Candidate <b>HILLARY CLINTON</b>			<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support  <input checked="" type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House District: _____  <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____         </div> </div>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">111327.59</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">56258.70</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANTHONY PARKER

[Electronically Filed]

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>REPUBLICAN NATIONAL COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00003418	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 04 / 22 / 2015	

Full Name of Payee <b>GOOGLE INC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Mailing Address PO BOX 39000		Amount 8777.21	
City SAN FRANCISCO	State CA	Zip Code 94139	Transaction ID : 2015M04SE0003
Purpose of Expenditure MEDIA BUY	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		111327.59	

Full Name of Payee <b>PANDORA</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Mailing Address 2101 WEBSTER STREET 16TH FLOOR		Amount 19998.00	
City OAKLAND	State CA	Zip Code 94612	Transaction ID : 2015M04SE0004
Purpose of Expenditure MEDIA BUY	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		111327.59	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28775.21
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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05 / 12 / 2015

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>REPUBLICAN NATIONAL COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00003418	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 04 / 22 / 2015	

Full Name of Payee <b>IMGE LLC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Mailing Address 603 KING STREET FOURTH FLOOR		Amount 17000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : 2015M04SE0005
Purpose of Expenditure MEDIA BUY	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		111327.59	

Full Name of Payee <b>TWITTER INC.</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Mailing Address PO BOX 12027		Amount 793.68	
City NEWARK	State NJ	Zip Code 07101	Transaction ID : 2015M04SE0006
Purpose of Expenditure MEDIA BUY	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		111327.59	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	17793.68
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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ANTHONY PARKER

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>REPUBLICAN NATIONAL COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00003418	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 04 / 22 / 2015	

Full Name of Payee <b>BRIGHTROLL INC</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Mailing Address PO BOX 8420		Amount 8500.00	
City PASADENA	State CA	Zip Code 91109	Transaction ID : 2015M04SE0008
Purpose of Expenditure MEDIA PRODUCTION		Category/Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 12 / 2015
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		111327.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	8500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	111327.59

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ANTHONY PARKER

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Signature